FORM PFS PERSONAL FINANCIAL STATEMENT **COVER SHEET** PAGE 1 PAGE# Filed in accordance with chapter 572 of the Government Code. 27 For filings required in 2019, covering calendar year ending December 31, 2018. ACCOUNT # Use FORM PFS--INSTRUCTION GUIDE when completing this form. 00032386 1 NAME TITLE; FIRST; MI OFFICE USE ONLY The Honorable Geanie W. **ELECTRONICALLY FILED** NICKNAME; LAST; SUFFIX 04/29/2019 Morrison 2 ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP Receipt # P. O. BOX 4642 HD / PM Amount VICTORIA, TX 77903-4642 Date Processed (CHECK IF FILER'S HOME ADDRESS) AREA CODE PHONE NUMBER; EXTENSION **TELEPHONE** Date Imaged NUMBER REASON FOR FILIING STATEMENT CANDIDATE _____ (INDICATE OFFICE) ELECTED OFFICER HOUSE OF REPRESENTATIVES, DISTRICT 30 (INDICATE OFFICE) APPOINTED OFFICER ______ (INDICATE AGENCY) EXECUTIVE HEAD ____ (INDICATE AGENCY) FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT STATE PARTY CHAIR ______ (INDICATE PARTY) OTHER _____ (INDICATE POSITION) **5** Family members whose financial activity you are reporting (see instructions). Mr. JACK R. MORRISON Jr. **DEPENDENT CHILD** In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

SOURCES OF OCCUPATIONAL INCOME PART 1A If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD ___ 2 EMPLOYMENT NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER** State of Texas ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE P. O. BOX 2910 AUSTIN, TX 78768 **POSITION HELD** STATE REPRESENTATIVE NATURE OF OCCUPATION SELF-EMPLOYED INFORMATION RELATES TO FILER X SPOUSE DEPENDENT CHILD _ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER** SFLF ADDRESS / PO BOX; APT / SUITE #; ZIP CODE CITY; STATE: 1501 E. MOCKINGBIRD LANE, SUITE 300 VICTORIA, TX 77904 POSITION HELD NATURE OF OCCUPATION X SELF-EMPLOYED **CPA** INFORMATION RELATES TO FILER X SPOUSE DEPENDENT CHILD ___ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER** M. G. & LILLIE A. JOHNSON FOUNDATION ADDRESS / PO BOX; APT / SUITE #; ZIP CODE CITY; STATE; P. O. BOX 2269 VICTORIA, TX 77902 **POSITION HELD TRUSTEE**

SELF-EMPLOYED

NATURE OF OCCUPATION

SOURCES OF OCCUPATIONAL INCOME PART 1A If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 INFORMATION RELATES TO FILER X SPOUSE DEPENDENT CHILD ___ 2 EMPLOYMENT NAME AND ADDRESS OF EMPLOYER / POSITION HELD EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER SELF** ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1501 E. MOCKINGBIRD LANE, SUITE 300 VICTORIA, TX 77904 **POSITION HELD** NATURE OF OCCUPATION X SELF-EMPLOYED FINANCIAL ADVISOR

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List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

1	BUSINESS ENTITY	WELLS FARGO & CO	MPANY (WFC)	NAME	
2	STOCK HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD)
3	NUMBER OF SHARES	LESS THAN 100	100 TO 499	500 TO 999	1,000 TO 4,999
		LESS THAN 10K	X 10,000 OR MORE		
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	BUSINESS ENTITY			NAME	
	BOSINEOS ENTIT	GENERAL ELECTRIC	COMPANY (GE)	TW WIL	
	STOCK HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	
	NUMBER OF SHARES	LESS THAN 100	100 TO 499	500 TO 999	X 1,000 TO 4,999
		LESS THAN 10K	10,000 OR MORE		
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
\vdash					
	BUSINESS ENTITY			NAME	
	BUSINESS ENTITY	Cisco Systems Inc. (C	SCO)	NAME	
	STOCK HELD OR ACQUIRED BY	Cisco Systems Inc. (C	SCO) X SPOUSE	DEPENDENT CHILD)
	STOCK HELD OR				1,000 TO 4,999
	STOCK HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	
	STOCK HELD OR ACQUIRED BY	X FILER LESS THAN 100	X SPOUSE X 100 TO 499	DEPENDENT CHILD	
	STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN	X FILER LESS THAN 100 LESS THAN 10K	X SPOUSEX 100 TO 499☐ 10,000 OR MORE	DEPENDENT CHILD	1,000 TO 4,999
	STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS	X FILER LESS THAN 100 LESS THAN 10K	X SPOUSEX 100 TO 499☐ 10,000 OR MORE	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999
	STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS	X FILER LESS THAN 100 LESS THAN 10K LESS THAN \$5,000	X SPOUSEX 100 TO 499☐ 10,000 OR MORE	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
=	STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR	X FILER LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 HCP, INC (HCP) X FILER	X SPOUSE X 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE
	STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	X FILER LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 HCP, INC (HCP)	X SPOUSEX 100 TO 499☐ 10,000 OR MORE☐ \$5,000 - \$9,999X SPOUSE	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME	1,000 TO 4,999 \$25,000OR MORE
	STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	X FILER LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 HCP, INC (HCP) X FILER LESS THAN 100	 X SPOUSE X 100 TO 499 ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999 X SPOUSE X 100 TO 499 	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

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1 BUSINESS ENTITY				
1 BOSINESS ENTIT	ALLSTATE (ALL)	ı	NAME	
2 STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	·
3 NUMBER OF SHARES	LESS THAN 100	100 TO 499	X 500 TO 999	1,000 TO 4,999
4 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	ALTRIA (MO)	1	NAME	
STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	
NUMBER OF SHARES	LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	X 1,000 TO 4,999
IF SOLD NET GAIN	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
☐ NET LOSS				
BUSINESS ENTITY	AMERICAN ELECTRIC		NAME	
STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
	LESS THAN 100	100 TO 499	DEPENDENT CHILD	X 1,000 TO 4,999
ACQUIRED BY				
ACQUIRED BY	LESS THAN 100	100 TO 499		
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN	LESS THAN 100	100 TO 499 10,000 OR MORE \$5,000 - \$9,999	500 TO 999	X 1,000 TO 4,999
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS	LESS THAN 100	100 TO 499 10,000 OR MORE \$5,000 - \$9,999	500 TO 999 \$10,000 - \$24,999	X 1,000 TO 4,999
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS	LESS THAN 100 LESS THAN 10K LESS THAN \$5,000	100 TO 499 10,000 OR MORE \$5,000 - \$9,999	500 TO 999 \$10,000 - \$24,999	X 1,000 TO 4,999 \$25,000OR MORE
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR	LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 EXXON MOBIL (XOM) FILER LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999 X SPOUSE ☐ 100 TO 499	500 TO 999 \$10,000 - \$24,999	X 1,000 TO 4,999 \$25,000OR MORE
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 EXXON MOBIL (XOM)	100 TO 499 10,000 OR MORE \$5,000 - \$9,999	500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	X 1,000 TO 4,999 \$25,000OR MORE
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 EXXON MOBIL (XOM) FILER LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999 X SPOUSE ☐ 100 TO 499	500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	X 1,000 TO 4,999 \$25,000OR MORE

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1 BUSINESS ENTITY				
	INTERNATIONAL BUS	1 SINESS MACHINES (IE	NAME BM)	
2 STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
3 NUMBER OF SHARES	LESS THAN 100	100 TO 499	X 500 TO 999	1,000 TO 4,999
	LESS THAN 10K	10,000 OR MORE		
4 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	JOHNSON & JOHNSO		NAME	
STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
NUMBER OF SHARES	LESS THAN 100	100 TO 499	X 500 TO 999	1,000 TO 4,999
	LESS THAN 10K	10,000 OR MORE		
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY		1	NAME	
	KRAFT HEINZ (KHC)			
STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
	FILER LESS THAN 100	X SPOUSE 100 TO 499	DEPENDENT CHILD	
ACQUIRED BY				_
ACQUIRED BY	LESS THAN 100	100 TO 499		_
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN	LESS THAN 100	100 TO 499 10,000 OR MORE \$5,000 - \$9,999	X 500 TO 999	1,000 TO 4,999
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS	LESS THAN 100 LESS THAN 10K LESS THAN \$5,000	100 TO 499 10,000 OR MORE \$5,000 - \$9,999	X 500 TO 999 S10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR	LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 MERCK (MRK)	100 TO 499 10,000 OR MORE \$5,000 - \$9,999	X 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 MERCK (MRK) FILER	100 TO 499 10,000 OR MORE \$5,000 - \$9,999	X 500 TO 999	1,000 TO 4,999 \$25,000OR MORE
ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 MERCK (MRK) FILER LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999 X SPOUSE ☐ 100 TO 499	X 500 TO 999	1,000 TO 4,999 \$25,000OR MORE

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1	BUSINESS ENTITY	MICROSOFT (MSFT)		NAME	
2	STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
3	NUMBER OF SHARES	LESS THAN 100	100 TO 499	☐ 500 TO 999	X 1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	BUSINESS ENTITY	MONDELEZ INTL (MC		NAME	
	STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
	NUMBER OF SHARES	LESS THAN 100	100 TO 499 10,000 OR MORE	X 500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	BUSINESS ENTITY	FIDELITY GOVT MMK	T CAPITAL RESERVE	NAME ES (FZAXX)	
	STOCK HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD)
	NUMBER OF SHARES	LESS THAN 100	100 TO 499 X 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	BUSINESS ENTITY	PHILLIP MORRIS INT		NAME	
	STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
	NUMBER OF SHARES	LESS THAN 100	100 TO 499 10,000 OR MORE	□ 500 то 999	X 1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE

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1 BUSINESS ENTITY	PRC	OCTOR & GAMBLE		NAME	
2 STOCK HELD OR ACQUIRED BY	□ F	FILER	X SPOUSE	DEPENDENT CHILD)
3 NUMBER OF SHARES		LESS THAN 100 LESS THAN 10K	100 TO 499	X 500 TO 999	1,000 TO 4,999
I =	GAIN —	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	SPD	PR S&P 500 ETF T	RUST UNIT SER 1 S&	NAME LP (SPY)	
STOCK HELD OR ACQUIRED BY	X F	FILER	X SPOUSE	DEPENDENT CHILD	
NUMBER OF SHARES		LESS THAN 100 LESS THAN 10K	X 100 TO 499 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
IF SOLD X NET	GAIN X L	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
DUOMESO ENTERV					
BUSINESS ENTITY	TRA	VELERS COMPA		NAME	
BUSINESS ENTITY STOCK HELD OR ACQUIRED BY		VELERS COMPA		NAME DEPENDENT CHILD)
STOCK HELD OR		FILER LESS THAN 100	X SPOUSE		1,000 TO 4,999
STOCK HELD OR ACQUIRED BY		FILER	NIES (TRV) X SPOUSE	DEPENDENT CHILD	_
STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET		FILER LESS THAN 100	X SPOUSE	DEPENDENT CHILD	_
STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET	GAIN GAIN	FILER LESS THAN 100 LESS THAN 10K	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD X 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999
STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET	GAIN LOSS L	FILER LESS THAN 100 LESS THAN 10K	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD X 500 TO 999	1,000 TO 4,999
STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET	GAIN LOSS UVER	FILER LESS THAN 100 LESS THAN 10K LESS THAN \$5,000	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD X 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET NET BUSINESS ENTITY STOCK HELD OR	GAIN LOSS L	FILER LESS THAN 100 LESS THAN 10K LESS THAN \$5,000	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 X SPOUSE 100 TO 499 100 TO 499	DEPENDENT CHILD X 500 TO 999 \$10,000 - \$24,999 NAME	1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET NET BUSINESS ENTITY STOCK HELD OR ACQUIRED BY NUMBER OF SHARES	GAIN LOSS VER	FILER LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 RIT (VER)	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 X SPOUSE X SPOUSE 10,000 OR MORE 10,000 OR MORE	DEPENDENT CHILD X 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET NET BUSINESS ENTITY STOCK HELD OR ACQUIRED BY NUMBER OF SHARES	GAIN VER	FILER LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 RIT (VER) FILER LESS THAN 100	X SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 X SPOUSE 100 TO 499 100 TO 499	DEPENDENT CHILD X 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

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List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

which the child is listed on the Co	10. 0001.			
1 BUSINESS ENTITY	BERKSHIRE HATHAV		NAME	
2 STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
3 NUMBER OF SHARES	LESS THAN 100	X 100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
4 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	FS INVESTMENT COI	N RPORATION II (30282X	NAME (103)	
STOCK HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
NUMBER OF SHARES	LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
-				
BUSINESS ENTITY	BLACKSTONE REAL	N ESTATE INCOME (092	NAME 59K104)	
BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	BLACKSTONE REAL)
STOCK HELD OR		ESTATE INCOME (092	59K104)	X 1,000 TO 4,999
STOCK HELD OR ACQUIRED BY	FILER LESS THAN 100	ESTATE INCOME (092 X SPOUSE 100 TO 499	59K104) DEPENDENT CHILD	

MUTUAL FUNDS PART 4

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	AMERICAN INVESTM	ENT COMPANY OF AN	NAME MERICA (AIVSX)	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	X 1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	SPDR S&P 500 ETF T	ا &S RUST UNIT SER 1	NAME P (SPY)	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
	IF SOLD X NET GAIN NET LOSS	X LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
				1445	
	MUTUAL FUND	DFA COMMODITY ST	RATEGY PORTFOLIO	NAME	
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	DFA COMMODITY ST)
	SHARES OF MUTUAL FUND		RATEGY PORTFOLIO		1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100	RATEGY PORTFOLIO X SPOUSE 100 TO 499	DEPENDENT CHILD	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN X NET LOSS	FILER LESS THAN 100 5,000 to 9,999	TRATEGY PORTFOLIO	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND	FILER LESS THAN 100 5,000 to 9,999	TRATEGY PORTFOLIO	DEPENDENT CHILD	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN X NET LOSS	FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000	TRATEGY PORTFOLIO	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN X NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000 DFA INVESTMENT G	RATEGY PORTFOLIO X SPOUSE 100 TO 499 X 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN X NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000 DFA INVESTMENT G FILER LESS THAN 100	X SPOUSE 100 TO 499 X 10,000 OR MORE 15,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

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List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

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1	MUTUAL FUND	DFA EMERGING MA	ARKETS CORE EQUITY	NAME (DFCEX)	
2	SHARES OF MUTUAL FUNI HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILI)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100 5,000 to 9,999	100 TO 499 X 10,000 OR MORE	□ 500 ТО 999	1,000 TO 4,999
4	IF SOLD NET GAII		\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
F	MUTUAL FUND			NAME	
	MUTUAL FUND	DFA U S TARGETEI	O VALUE INSTL (DFFV)	NAME ()	
	SHARES OF MUTUAL FUNI HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILI	D
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499	500 TO 999	1,000 TO 4,999
		5,000 to 9,999	X 10,000 OR MORE		
	IF SOLD X NET GAIL NET LOS		\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
F	MUTUAL FUND			NIA NAE	
	MUTUAL FUND	DFA INTERNATION	AL CORE EQUITY (DFIE	NAME EX)	
	MUTUAL FUND SHARES OF MUTUAL FUNI HELD OR ACQUIRED BY				D
	SHARES OF MUTUAL FUNI	FILER LESS THAN 100	X SPOUSE	EX)	D
	SHARES OF MUTUAL FUNI HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER	AL CORE EQUITY (DFIE	EX) DEPENDENT CHILI	_
	SHARES OF MUTUAL FUNI HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100 5,000 to 9,999	X SPOUSE 100 TO 499 X 10,000 OR MORE	EX) DEPENDENT CHILI	_
	SHARES OF MUTUAL FUNIHELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD X NET GAIL NET LOS	FILER LESS THAN 100 5,000 to 9,999	AL CORE EQUITY (DFIE X SPOUSE 100 TO 499 X 10,000 OR MORE 5 5,000 - \$9,999	DEPENDENT CHILI 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUNIHELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD X NET GAIL NET LOS	FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000 DFA U S LARGE CA	AL CORE EQUITY (DFIE X SPOUSE 100 TO 499 X 10,000 OR MORE 5 5,000 - \$9,999	DEPENDENT CHILI	1,000 TO 4,999
	SHARES OF MUTUAL FUNIHELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD X NET GAIL NET LOS	FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000 DFA U S LARGE CA	AL CORE EQUITY (DFIE X SPOUSE 100 TO 499 X 10,000 OR MORE 5 5,000 - \$9,999	DEPENDENT CHILI 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUNIHELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD X NET GAIL NET LOS MUTUAL FUND SHARES OF MUTUAL FUNI	D FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000 DFA U S LARGE CA	AL CORE EQUITY (DFIE X SPOUSE 100 TO 499 X 10,000 OR MORE 5 \$5,000 - \$9,999 P VALUE	DEPENDENT CHILI 500 TO 999 \$10,000 - \$24,999 NAME	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUNIHELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD X NET GAIL NET LOS MUTUAL FUND SHARES OF MUTUAL FUNIHELD OR ACQUIRED BY NUMBER OF SHARES OF	D FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000 DFA U S LARGE CA	AL CORE EQUITY (DFIE X SPOUSE 100 TO 499 X 10,000 OR MORE 5,000 - \$9,999 P VALUE X SPOUSE	DEPENDENT CHILI DEPENDENT CHILI 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILI	1,000 TO 4,999 \$25,000OR MORE
	SHARES OF MUTUAL FUNIHELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD X NET GAIL NET LOS MUTUAL FUND SHARES OF MUTUAL FUNIHELD OR ACQUIRED BY NUMBER OF SHARES OF	DFA U S LARGE CA LESS THAN \$5,000 DFA U S LARGE CA LESS THAN \$5,000 DFA U S LARGE CA S LESS THAN \$5,000 DFA U S LARGE CA S LESS THAN \$5,000 S LARGE CA	X SPOUSE 100 TO 499 X 10,000 OR MORE 100 TO 499	DEPENDENT CHILI DEPENDENT CHILI 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILI	1,000 TO 4,999 \$25,000OR MORE

MUTUAL FUNDS PART 4

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	DFA REAL ESTATE S		NAME	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499	500 TO 999	1,000 TO 4,999
		X 5,000 to 9,999	10,000 OR MORE		
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	DFA U S SMALL CAP		NAME	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499	500 TO 999	1,000 TO 4,999
		5,000 to 9,999	X 10,000 OR MORE		
	IF SOLD X NET GAIN NET LOSS	X LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
⊢					
E				14145	
	MUTUAL FUND	DFA U S LARGE COM		NAME	
		DFA U S LARGE CON		NAME DEPENDENT CHILD)
	MUTUAL FUND SHARES OF MUTUAL FUND		IPANY PORTFOLIO		1,000 TO 4,999
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER	MPANY PORTFOLIO X SPOUSE	DEPENDENT CHILD	
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100	MPANY PORTFOLIO X SPOUSE 100 TO 499	DEPENDENT CHILD	
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD X NET GAIN	FILER LESS THAN 100 5,000 to 9,999	MPANY PORTFOLIO X SPOUSE 100 TO 499 X 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD	1,000 TO 4,999
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD IF SOLD NET LOSS	FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000	MPANY PORTFOLIO X SPOUSE 100 TO 499 X 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD IF SOLD NET LOSS	FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000	X SPOUSE 100 TO 499 X 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD X NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000 DFA INTERNATIONAL	MPANY PORTFOLIO X SPOUSE 100 TO 499 X 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME (DISVX)	1,000 TO 4,999 \$25,000OR MORE
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD IF S	FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000 DFA INTERNATIONAL FILER	MPANY PORTFOLIO X SPOUSE 100 TO 499 X 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME (DISVX) DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD IF S	FILER LESS THAN 100 5,000 to 9,999 X LESS THAN \$5,000 DFA INTERNATIONAL FILER LESS THAN 100	X SPOUSE 100 TO 499	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME (DISVX) DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

MUTUAL FUNDS PART 4 If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. MUTUAL FUND NAME T ROWE PRICE TAX FREE INCOME (PRTRP) SHARES OF MUTUAL FUND X SPOUSE HELD OR ACQUIRED BY FILER DEPENDENT CHILD NUMBER OF SHARES OF MUTUAL FUND LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 5,000 to 9,999 X 10,000 OR MORE 4 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NET LOSS

PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE OF INCOME	NAME AND ADDRESS AMERICAN INVESTMENT CO OF AMERICA
X Publicly held corporation	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2 RECEIVED BY	X FILER X SPOUSE DEPENDENT CHILD
3 AMOUNT	\$500 - \$4,999 X \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE
SOURCE OF INCOME	NAME AND ADDRESS
X Publicly held corporation	DFA Emerging Markets Core Fund (DFCEX) ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
AMOUNT	X \$500 - \$4,999
COLIDOE OF INCOME	NAME AND ADDRESS
SOURCE OF INCOME	NAME AND ADDRESS DEA International Small Can Value I
SOURCE OF INCOME X Publicly held corporation	NAME AND ADDRESS DFA International Small Cap Value I ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	DFA International Small Cap Value I
	DFA International Small Cap Value I
X Publicly held corporation	DFA International Small Cap Value I ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
X Publicly held corporation RECEIVED BY AMOUNT	DFA International Small Cap Value I ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000-OR MORE
X Publicly held corporation RECEIVED BY	DFA International Small Cap Value I ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD DEPEND
X Publicly held corporation RECEIVED BY AMOUNT	DFA International Small Cap Value I ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS
X Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	DFA International Small Cap Value I ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS DFA Investment Grade Portfolio
X Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	DFA International Small Cap Value I ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS DFA Investment Grade Portfolio ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY AMOUNT SOURCE OF INCOME X Publicly held corporation	DFA International Small Cap Value I ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS DFA Investment Grade Portfolio
RECEIVED BY AMOUNT SOURCE OF INCOME X Publicly held corporation	DFA International Small Cap Value I ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS DFA Investment Grade Portfolio ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE OF INCOME	NAME AND ADDRESS
X Publicly held corporation	DFA U. S. LARGE CAP VALUE PORTFOLIO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2 RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
3 AMOUNT	\$5,000 - \$4,999
SOURCE OF INCOME	NAME AND ADDRESS
X Publicly held corporation	DFA U. S. LARGE COMPANY PORTFOLIO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
AMOUNT	\$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE
SOURCE OF INCOME	NAME AND ADDRESS
SOURCE OF INCOME X Publicly held corporation	NAME AND ADDRESS DFA U. S. SMALL CAP PORTFOLIO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
_	DFA U. S. SMALL CAP PORTFOLIO
X Publicly held corporation	DFA U. S. SMALL CAP PORTFOLIO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
X Publicly held corporation RECEIVED BY AMOUNT	DFA U. S. SMALL CAP PORTFOLIO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000 - OR MORE
X Publicly held corporation RECEIVED BY	DFA U. S. SMALL CAP PORTFOLIO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD
X Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	DFA U. S. SMALL CAP PORTFOLIO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE ☐ FILER X SPOUSE ☐ DEPENDENT CHILD
X Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	DFA U. S. SMALL CAP PORTFOLIO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE ☐ FILER X SPOUSE ☐ DEPENDENT CHILD
RECEIVED BY AMOUNT SOURCE OF INCOME X Publicly held corporation	DFA U. S. SMALL CAP PORTFOLIO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE OF INCOME	NAME AND ADDRESS SPDR S&P 500 ETF
X Publicly held corporation	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2 RECEIVED BY	X FILER SPOUSE DEPENDENT CHILD
3 AMOUNT	X \$500 - \$4,999
SOURCE OF INCOME	NAME AND ADDRESS
X Publicly held corporation	DFA COMMODITY STRATEGY PORTFOLIO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
AMOUNT	X \$500 - \$4,999 S5,000 - \$9,999 S10,000 - \$24,999 S25,000OR MORE
SOURCE OF INCOME	NAME AND ADDRESS
SOURCE OF INCOME X Publicly held corporation	NAME AND ADDRESS DFA Emerging Markets Core Fund (DFCEX) ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
_	DFA Emerging Markets Core Fund (DFCEX)
_	DFA Emerging Markets Core Fund (DFCEX)
X Publicly held corporation	DFA Emerging Markets Core Fund (DFCEX) ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
X Publicly held corporation RECEIVED BY	DFA Emerging Markets Core Fund (DFCEX) ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD
X Publicly held corporation RECEIVED BY AMOUNT	DFA Emerging Markets Core Fund (DFCEX) ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD \$500 - \$4,999 X \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000-OR MORE
X Publicly held corporation RECEIVED BY AMOUNT	DFA Emerging Markets Core Fund (DFCEX) ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD \$500 - \$4,999 X \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000 - OR MORE NAME AND ADDRESS
RECEIVED BY AMOUNT SOURCE OF INCOME	DFA Emerging Markets Core Fund (DFCEX) ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE ☐ FILER X SPOUSE ☐ DEPENDENT CHILD
RECEIVED BY AMOUNT SOURCE OF INCOME	DFA Emerging Markets Core Fund (DFCEX) ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE ☐ FILER X SPOUSE ☐ DEPENDENT CHILD
RECEIVED BY AMOUNT SOURCE OF INCOME X Publicly held corporation	DFA Emerging Markets Core Fund (DFCEX) ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE OF INCOME	NAME AND ADDRESS DFA REAL ESTATE SEC
X Publicly held corporation	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2 RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
3 AMOUNT	\$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE
SOURCE OF INCOME	NAME AND ADDRESS
X Publicly held corporation	ALTRIA ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
AMOUNT	X \$500 - \$4,999
SOURCE OF INCOME	NAME AND ADDRESS
SOURCE OF INCOME	NAME AND ADDRESS AMERICAN ELECTRIC POWER
SOURCE OF INCOME X Publicly held corporation	
_	AMERICAN ELECTRIC POWER
_	AMERICAN ELECTRIC POWER
X Publicly held corporation	AMERICAN ELECTRIC POWER ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
X Publicly held corporation RECEIVED BY	AMERICAN ELECTRIC POWER ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Filer X SPOUSE DEPENDENT CHILD DEPENDENT CHILD
X Publicly held corporation RECEIVED BY AMOUNT	AMERICAN ELECTRIC POWER
X Publicly held corporation RECEIVED BY AMOUNT	AMERICAN ELECTRIC POWER ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD \$25,000-OR MORE X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000-OR MORE
X Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	AMERICAN ELECTRIC POWER ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS EXXON MOBIL
X Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	AMERICAN ELECTRIC POWER ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS EXXON MOBIL
RECEIVED BY AMOUNT SOURCE OF INCOME X Publicly held corporation	AMERICAN ELECTRIC POWER ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD \$25,000 - OR MORE

PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE OF INCOME	NAME AND ADDRESS GENERAL ELECTRIC
X Publicly held corporation	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2 RECEIVED BY	X FILER X SPOUSE DEPENDENT CHILD
3 AMOUNT	X \$500 - \$4,999
SOURCE OF INCOME	NAME AND ADDRESS
X Publicly held corporation	IBM ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
AMOUNT	X \$500 - \$4,999
SOURCE OF INCOME	NAME AND ADDRESS
SOURCE OF INCOME	NAME AND ADDRESS JOHNSON & JOHNSON
SOURCE OF INCOME X Publicly held corporation	
_	JOHNSON & JOHNSON
_	JOHNSON & JOHNSON
X Publicly held corporation	JOHNSON & JOHNSON ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
X Publicly held corporation RECEIVED BY	JOHNSON & JOHNSON ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD DEPEND
RECEIVED BY AMOUNT SOURCE OF INCOME	JOHNSON & JOHNSON ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD S25,000-OR MORE X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000-OR MORE NAME AND ADDRESS KRAFT HEINZ
X Publicly held corporation RECEIVED BY AMOUNT	JOHNSON & JOHNSON ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE
RECEIVED BY AMOUNT SOURCE OF INCOME	JOHNSON & JOHNSON ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD S25,000-OR MORE X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000-OR MORE NAME AND ADDRESS KRAFT HEINZ
RECEIVED BY AMOUNT SOURCE OF INCOME	JOHNSON & JOHNSON ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD S25,000-OR MORE X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000-OR MORE NAME AND ADDRESS KRAFT HEINZ
RECEIVED BY AMOUNT SOURCE OF INCOME X Publicly held corporation	JOHNSON & JOHNSON ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE OF INCOME	NAME AND ADDRESS
X Publicly held corporation	MICROSOFT ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2 RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
3 AMOUNT	X \$500 - \$4,999
SOURCE OF INCOME	NAME AND ADDRESS
X Publicly held corporation	PHILIP MORRIS INTL ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
AMOUNT	X \$500 - \$4,999
SOURCE OF INCOME	NAME AND ADDDESS
SOURCE OF INCOME X Publicly held corporation	NAME AND ADDRESS SPDR S & P 500 ETF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
_	SPDR S & P 500 ETF
X Publicly held corporation	SPDR S & P 500 ETF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
X Publicly held corporation RECEIVED BY AMOUNT	SPDR S & P 500 ETF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE X FILER X SPOUSE DEPENDENT CHILD X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000 - OR MORE
X Publicly held corporation RECEIVED BY	SPDR S & P 500 ETF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE X FILER X SPOUSE DEPENDENT CHILD
X Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	SPDR S & P 500 ETF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE X FILER X SPOUSE DEPENDENT CHILD X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS T ROWE PRICE TAX FREE INCOME
RECEIVED BY AMOUNT SOURCE OF INCOME X Publicly held corporation	SPDR S & P 500 ETF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE X FILER

PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE OF INCOME	
	NAME AND ADDRESS TRAVELERS COMPANIES
X Publicly held corporation	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2 RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
3 AMOUNT	X \$500 - \$4,999
SOURCE OF INCOME	NAME AND ADDRESS
	VEREIT
X Publicly held corporation	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
AMOUNT	FILER X SPOUSE DEPENDENT CHILD
AMOUNT	X \$500 - \$4,999 S5,000 - \$9,999 S10,000 - \$24,999 S25,000OR MORE
SOURCE OF INCOME	NAME AND ADDRESS WELLS FARGO & CO
X Publicly held corporation	WELLS FARGO & CO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
_	WELLS FARGO & CO
_	WELLS FARGO & CO
_	WELLS FARGO & CO
X Publicly held corporation	WELLS FARGO & CO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
X Publicly held corporation RECEIVED BY AMOUNT	WELLS FARGO & CO
X Publicly held corporation RECEIVED BY	WELLS FARGO & CO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
X Publicly held corporation RECEIVED BY AMOUNT	WELLS FARGO & CO
RECEIVED BY AMOUNT SOURCE OF INCOME	WELLS FARGO & CO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE X FILER X SPOUSE □ DEPENDENT CHILD □ \$25,000 - OR MORE □ \$500 - \$4,999 □ \$5,000 - \$9,999 X \$10,000 - \$24,999 □ \$25,000 - OR MORE NAME AND ADDRESS FS INVESTMENT CORPORATION III
RECEIVED BY AMOUNT SOURCE OF INCOME	WELLS FARGO & CO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE X FILER X SPOUSE □ DEPENDENT CHILD □ \$25,000 - OR MORE □ \$500 - \$4,999 □ \$5,000 - \$9,999 X \$10,000 - \$24,999 □ \$25,000 - OR MORE NAME AND ADDRESS FS INVESTMENT CORPORATION III
RECEIVED BY AMOUNT SOURCE OF INCOME	WELLS FARGO & CO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE X FILER X SPOUSE □ DEPENDENT CHILD □ \$25,000 - OR MORE □ \$500 - \$4,999 □ \$5,000 - \$9,999 X \$10,000 - \$24,999 □ \$25,000 - OR MORE NAME AND ADDRESS FS INVESTMENT CORPORATION III
RECEIVED BY AMOUNT SOURCE OF INCOME X Publicly held corporation	WELLS FARGO & CO ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE X FILER X SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000-OR MORE NAME AND ADDRESS FS INVESTMENT CORPORATION III ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE OF INCOME	NAME AND ADDRESS SN OPERATING LLC
X Publicly held corporation	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2 RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
3 AMOUNT	\$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 X \$25,000OR MORE
SOURCE OF INCOME	NAME AND ADDRESS
X Publicly held corporation	DFA INTL CORE EQUITY ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
AMOUNT	\$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 X \$25,000OR MORE
SOURCE OF INCOME	NAME AND ADDRESS
SOURCE OF INCOME	NAME AND ADDRESS ALLSTATE
SOURCE OF INCOME X Publicly held corporation	
_	ALLSTATE
_	ALLSTATE
X Publicly held corporation	ALLSTATE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
X Publicly held corporation RECEIVED BY AMOUNT	ALLSTATE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Filer X SPOUSE DEPENDENT CHILD DEPENDENT CHILD
X Publicly held corporation RECEIVED BY	ALLSTATE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000-OR MORE
X Publicly held corporation RECEIVED BY AMOUNT	ALLSTATE
X Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	ALLSTATE
X Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	ALLSTATE
RECEIVED BY AMOUNT SOURCE OF INCOME X Publicly held corporation	ALLSTATE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS BLACKSTONE REAL ESTATE INCOME ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE OF INCOME	NAME AND ADDRESS
X Publicly held corporation	FIDELITY GOVT MMKT ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2 RECEIVED BY	
Z KEGEWEG BI	X FILER X SPOUSE DEPENDENT CHILD
3 AMOUNT	X \$500 - \$4,999
SOURCE OF INCOME	NAME AND ADDRESS
	MERCK
X Publicly held corporation	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
AMOUNT	X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE
	[] \$25,000 - \$4,333
SOURCE OF INCOME	NAME AND ADDRESS
	MONDELEZ INTL
SOURCE OF INCOME X Publicly held corporation	
	MONDELEZ INTL
X Publicly held corporation	MONDELEZ INTL
	MONDELEZ INTL
X Publicly held corporation	MONDELEZ INTL ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Filer X SPOUSE DEPENDENT CHILD DEPENDENT
X Publicly held corporation RECEIVED BY	MONDELEZ INTL ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
X Publicly held corporation RECEIVED BY	MONDELEZ INTL ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Filer X SPOUSE DEPENDENT CHILD DEPENDENT
X Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	MONDELEZ INTL ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS PROCTOR & GAMBLE
X Publicly held corporation RECEIVED BY AMOUNT	MONDELEZ INTL ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE
X Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	MONDELEZ INTL ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS PROCTOR & GAMBLE
X Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	MONDELEZ INTL ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS PROCTOR & GAMBLE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY AMOUNT SOURCE OF INCOME X Publicly held corporation	MONDELEZ INTL ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS PROCTOR & GAMBLE
RECEIVED BY AMOUNT SOURCE OF INCOME X Publicly held corporation	MONDELEZ INTL ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE FILER X SPOUSE DEPENDENT CHILD X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS PROCTOR & GAMBLE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

INTERESTS IN REAL PROPERTY

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

1 HELD OR ACQUIRED BY STREET ADDRESS STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE					
NOT AVAILABLE CHECK IF FILERS NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED	1 HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILE	D
1.0000 lots	NOT AVAILABLE X CHECK IF FILER'S		STREET ADDRESS, INCLU	DING CITY, COUNTY, AND	STATE
RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST) IF SOLD	X LOTS	1.00000 lots		ND NAME OF COUNTY WHE	ERE LOCATED
HELD OR ACQUIRED BY FILER X SPOUSE DEPENDENT CHILD	RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL				
STREET ADDRESS STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 1506 E. 13TH STREET UNIT 8 AUSTIN, TX 78703 DESCRIPTION NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots TRAVIS COUNTY NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST) IF SOLD NET GAIN NESS THAN \$5,000	LI NET GAIN	LESS THAN \$5,00	00 \$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
NOT AVAILABLE 1506 E. 13TH STREET UNIT 8 AUSTIN, TX 78703					
	HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILE)
RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST) IF SOLD NET GAIN LESS THAN \$5,000	STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S	1506 E. 13TH STRE	STREET ADDRESS, INCLU		
☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE	STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION X LOTS	1506 E. 13TH STRE UNIT 8 AUSTIN, TX 78703 NUMBE 1.00000 lots	STREET ADDRESS, INCLU	DING CITY, COUNTY, AND	STATE
	STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION X LOTS ACRES NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL	1506 E. 13TH STRE UNIT 8 AUSTIN, TX 78703 NUMBE 1.00000 lots	STREET ADDRESS, INCLU	DING CITY, COUNTY, AND	STATE

INTERESTS IN REAL PROPERTY

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under

	which the child is listed on the Co	over Sheet.	avity, maleate the erila about	whom you are reporting by providing the number under
1	HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD
2	STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS		STREET ADDRESS, INCLU	JDING CITY, COUNTY, AND STATE
3	DESCRIPTION LOTS ACRES	NUM 8000.00000 acres DIMMIT		ND NAME OF COUNTY WHERE LOCATED
4	NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST)			
5	IF SOLD NET GAIN NET LOSS	LESS THAN \$5	\$5,000 \$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE

BOARDS AND EXECUTIVE POSITIONS

PART 12

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 ORGANIZATION	M. G. & LILLIE A. JOI	HNSON FOUNDATION		
2 POSITION HELD	TRUSTEE			
3 POSITION HELD BY	FILER	X SPOUSE	DEPENDENT CHILD	
ORGANIZATION	CALHOUN-VICTORIA	A FOREIGN TRADE ZO	NE, INC.	
POSITION HELD	BOARD MEMBER			
POSITION HELD BY	FILER	X SPOUSE	DEPENDENT CHILD	
ORGANIZATION	ESCORIAL CONDON	INIUM OWNERS ASS	SN	
POSITION HELD	BOARD MEMBER			
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	
ORGANIZATION	TEXAS CONSERVAT	TIVE COALITION RESE	ARCH INSTITUTE	
POSITION HELD	VICE- PRESIDENT			
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	
ORGANIZATION	TEXAS CONSERVAT	TIVE COALITION		
POSITION HELD	BOARD MEMBER			
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	
ORGANIZATION	BABY MOSES FOUN	IDATION		
POSITION HELD	PRESIDENT			
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	

PERSONAL FINANCIAL STATEMENT

PARTS MARKED "NOT APPLICABLE" BY FILER

FORM PFS
COVER SHEET
PAGE 2

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. If you place a check in a box, do NOT include pages for that Part in the report.

6	PAR	TS NOT APPLICABLE TO FILER
		N/A Part 1A - Sources of Occupational Income
	Χ	N/A Part 1B - Retainers
		N/A Part 2 - Stock
	Χ	N/A Part 3 - Bonds, Notes & Other Commercial Paper
		N/A Part 4 - Mutual Funds
		N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
	Χ	N/A Part 6 - Personal Notes and Lease Agreements
		N/A Part 7A - Interests in Real Property
	Χ	N/A Part 7B - Interests in Business Entities
	Х	N/A Part 8 - Gifts
	Χ	N/A Part 9 - Trust Income
	X	N/A Part 10A - Blind Trusts
	Χ	N/A Part 10B - Trustee Statement
	Χ	N/A Part 11A - Business Associations
	X	N/A Part 11B - Assets of Business Associations
	Χ	N/A Part 11C - Liabilities of Business Associations
		N/A Part 12 - Boards and Executive Positions
	Χ	N/A Part 13 - Expenses Accepted Under Honorarium Exception
	Χ	N/A Part 14 - Interest in Business in Common with Lobbyist
	Χ	N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
	Χ	N/A Part 16 - Representation by Legislator Before State Agency
	Χ	N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
	Χ	N/A Part 18 - Legislative Continuances
	Χ	N/A Part 19 - Contracts with Governmental Entity
	Χ	N/A Part 20 - Bond Counsel Services Provided by a Legislator

law requires the personal financial statement to be verification page on a personal statement filed electronic vidual required to file the personal financial statement.	ed. Without proper verification, the statement	is not considered filed	
		no not considered med.	
nudal required to life the personal illiancial statement.	ally with the Texas Ethics Commission must	have the electronic signature of	of the
verification page on a personal financial statement filed whe individual required to file the personal financial statements on authorized by law to administer oaths and affirmations	ent as wells as the signature and stamp or se		
	I swear, or affirm, under penalty of perj covers calendar year ending Decembe and includes all information required to 572 of the Government Code.	r 31, 2018 , and is true and cor	rrect
	The Honorable Ge	anie W. Morrison	
	Signature	e of Filer	
FIX NOTARY STAMP / SEAL ABOVE			
vorn to and subscribed before me, by the said	, thi	s the c	day
, 20, to certify which, wit	tness my hand and seal of office.		
Signature of officer administering oath Printed r	name of officer administering oath	Title of officer administering	oath